Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

NAME OF FILER LABORERS INTERNATIONAL UNION OF NORTH AMERICA LOCAL 89 PAC FUND	

CALIFORNIA FORM 497

AREA CODE/PHONE NUMBER (619)263-6661	I.D. NUMBER (if applicable) 1316497

STREET ADDRESS

CITY SAN DIEGO	STATE CA	ZIP CODE 92105

Date of This Filing _____ 12/25/2018 _____

Report No. _____ 08-2018 _____

☐ **Amendment to Report No.** _____
(explain below)

No. of Pages _____ 2 _____

Date Stamp

Page 1 of 2

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Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		

*Contributor Codes

IND - Individual
COM - Recipient Committee (other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Reason for Amendment:

FPPC Form 497(June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

2329545-0

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

CALIFORNIA FORM 497

NAME OF FILER LABORERS INTERNATIONAL UNION OF NORTH AMERICA LOCAL 89 PAC FUND	**Date of This Filing** _____ 12/25/2018
AREA CODE/PHONE NUMBER (619)263-6661	I.D. NUMBER (if applicable) 1316497	**Report No.** _____ 08-2018
STREET ADDRESS	☐ **Amendment to Report No.** _____ (explain below)
CITY SAN DIEGO	STATE CA	ZIP CODE 92105	**No. of Pages** _____ 2

Date Stamp

Page 2 of 2

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Late Contribution(s) Made

DATE MADE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
12/22/2018	SAN DIEGO COUNTY DEMOCRATIC PARTY SAN DIEGO, CA 92111 ID# 741906 Memo Reference: 1		$10,000.00	03/05/2019

Reason for Amendment:

2329545-0